

Amendments to the Claims:

This listing of claims will replace all prior versions, and listings of claims in the application:

Listing of Claims:

1-36. (Canceled)

37. (New) A method of determining a risk of having or developing a clinical subtype of Crohn's disease in a subject having Crohn's disease, said clinical subtype characterized by fibrostenosis or the need for small bowel surgery, said method comprising:

- (a) obtaining a sample from the subject;
- (b) contacting the sample from the subject with an antigen or fragment thereof specifically reactive with IgA anti-I2 antibodies; and
- (c) determining the presence and magnitude of IgA anti-I2 antibody response in the subject, wherein a greater magnitude of IgA anti-I2 antibody response indicates a greater risk of having or developing said clinical subtype characterized by fibrostenosis or the need for small bowel surgery.

38. (New) The method of claim 37, wherein assaying for the level of IgA anti-I2 antibodies in the subject comprises the steps of:

- (a) contacting a sample from the subject with an I2 antigen under conditions suitable to form a first complex of I2 antigen and antibody against said I2 antigen;
- (b) contacting said first complex with a labeled secondary antibody to form a second complex; and
- (c) detecting a level of said second complex, wherein a high level of said second complex indicates a high level of said IgA anti-I2 antibodies in the subject.

39. (New) The method of claim 37, further comprising determining the presence or absence of a NOD2 variant selected from the group consisting of SEQ ID NO: 3,

SEQ ID NO: 4, SEQ ID NO: 5, SEQ ID NO: 6, SEQ ID NO: 7, and SEQ ID NO: 8 in the subject, wherein a greater magnitude of IgA anti-I2 antibodies and the presence of said NOD2 variant in the subject indicates a greater risk of an aggressive form of said fibrostenotic subtype of Crohn's disease requiring small bowel surgery.

40. (New) The method of claim 39, wherein the combined greater magnitude of said IgA anti-I2 antibodies and the presence of said NOD2 variant in the subject indicates a greater risk of an aggressive form of said fibrostenotic subtype of Crohn's disease requiring small bowel surgery with an odds ratio of at least 6.

41. (New) The method of claim 37, further comprising determining the magnitude of anti-Saccharomyces cerevisiae antibodies (ASCA) in the subject, comprising obtaining a sample from the subject; contacting the sample from the subject with an antigen or fragment thereof specifically reactive with ASCA; and assaying for the level of ASCA in said sample by detecting specific binding of said antigen or fragment thereof, wherein a greater magnitude of said IgA anti-I2 antibodies and a greater magnitude of said ASCA in the subject indicates a greater risk of an aggressive form of said fibrostenotic subtype of Crohn's disease requiring small bowel surgery.

42. (New) The method of claim 41, wherein the combined greater magnitude of said IgA anti-I2 antibodies and said ASCA in the subject indicates a greater risk of an aggressive form of said fibrostenotic subtype of Crohn's disease requiring small bowel surgery with an odds ratio of at least 6.

43. (New) The method of claim 39, further comprising determining the magnitude of said ASCA in the subject, comprising obtaining a sample from the subject; contacting the sample from the subject with an antigen or fragment thereof specifically reactive with ASCA; and assaying for the level of ASCA in said sample by detecting specific binding of said antigen or fragment thereof, wherein the combined greater magnitude of IgA anti-I2 antibodies and said ASCA and the presence of said NOD2 variant in the subject indicates the

greatest risk for an aggressive form of said fibrostenotic subtype of Crohn's disease requiring small bowel surgery.

44. (New) The method of claim 43, wherein the combined greater magnitude of said IgA anti-I2 antibodies and said ASCA and the presence of said NOD2 variant in the subject indicates a greater risk of an aggressive form of said fibrostenotic subtype of Crohn's disease requiring small bowel surgery with an odds ratio of at least 9.

45. (New) The method of claim 37, further comprising determining the presence or absence of IgA anti-OmpC antibodies.